PTO/SB/08A&B (08-03) TRADE! Sestitute for form 1449A&B/PTO Complete if Known 10/653,529 Application Number **INFORMATION DISCLOSURE** Filing Date September 2, 2003 STATEMENT BY APPLICANT First Named Inventor Braune, Ingolf Art Unit 2877 (use as many sheets as necessary) Examiner Name Unassigned Sheet of Attorney Docket Number 089441-000000US

		Document Number	U.S. PATENT DO	T	
Examiner Initials*	Cite No.1	Number Kind Code <sup>2</sup> (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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		Country Code <sup>3</sup>	Number <sup>4</sup>	Kind Code <sup>®</sup> (# known)	Publication Date MM-DD-YYYY	Applicant of Cited  Document	Where Relevant Passages or Relevant Figures Appear	T⁵
M	AC	ΕP	0 598 630	A1	05-25-1994	Scientific Technologies Incorporated		
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10	AE	DE	199 13 156	A1	10-12-2000	Leuze Electronic GmbH + Co.		

Examiner Cite (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.						
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Examiner Signature	人	4/2/10	l Af	Date Considered	6-24	-0 <del>\</del>
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EXAMINER: Initial If reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Applicant's unique citation designation number (optional). Applicant is to place a check mark here if English language Translation is attached.



Substitute for form 1449B/PTO

## **INFORMATION DISCLOSURE** STATEMENT BY APPLICANT

(use as many sheets as necessary)

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Sheet	1	 of	1	

	Complete if Known						
Application Number	10/653,529						
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First Named Inventor	Braune, Ingolf						
Art Unit	2877						
Examiner Name	Unassigned						
Attorney Docket Number	089441-000000US						

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		Document Number					
Examiner Initials*	Cile No.1	Number Kind Code <sup>2</sup> (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear		
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Initials* No.		Country Code <sup>3</sup>	Number <sup>4</sup>	Kind Code <sup>5</sup> (if known)	Publication Date MM-DD-YYYY	Applicant of Cited Document	Passages or Relevant Figures Appear	T⁰		
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Examiner Signature	Michael	.) Staf	Date Considered	6-21-05

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